

**Political Organization  
Report of Contributions and Expenditures**

OMB No. 1545-1696

► See separate instructions.

**A For the period beginning** 10/16/2008 **and ending** 11/24/2008

**B Check applicable box:** ☒ Initial report ☐ Change of address ☐ Amended report ☐ Final report

**1 Name of organization** Midwest Enterprise Group **Employer identification number** 26 - 0697178

**2 Mailing address (P.O. box or number, street, and room or suite number)**  
PO Box 6193

**City or town, state, and ZIP code**  
Des Moines, IA 50309

**3 E-mail address of organization:** mpadvantage@hotmail.com **4 Date organization was formed:** 08/01/2007

**5a Name of custodian of records** Melissa Peterson **5b Custodian's address** 4514 Urbandale Avenue  
Des Moines, IA 50310

**6a Name of contact person** Melissa Peterson **6b Contact person's address** 4514 Urbandale Avenue  
Des Moines, IA 50310

**7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number**  
PO Box 6193  
**City or town, state, and ZIP code**  
Des Moines, IA 50309

**8 Type of report (check only one box)**

- ☐ First quarterly report (due by April 15)  
☐ Second quarterly report (due by July 15)  
☐ Third quarterly report (due by October 15)  
☐ Year-end report (due by January 31)  
☐ Mid-year report (Non-election year only-due by July 31)
- ☐ Monthly report for the month of: (due by the 20th day following the month shown above, except the December report, which is due by January 31)  
☐ Pre-election report (due by the 12th or 15th day before the election)  
(1) Type of election:  
(2) Date of election:  
(3) For the state of:  
☒ Post-general election report (due by the 30th day after general election)  
(1) Date of election: 11/04/2008  
(2) For the state of: IA

**9 Total amount of reported contributions (total from all attached Schedules A).....9. \$ 33500**

**10 Total amount of reported expenditures (total from all attached Schedules B).....10. \$ 28007**

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Melissa Peterson

12/04/2008

**Sign  
Here**

Signature of authorized official

Date

**Schedule A    Itemized Contributions**

Schedule A

**Contributor's name, mailing address and ZIP code**

POET  
4615 N. Lewis Avenue  
Sioux Falls, SD 57104

**Name of contributor's employer**

N/A

**Contributor's occupation**

N/A

**Aggregate contributions year-to-date**

\$ 1000

**Amount of contribution**

\$ 1000

**Date of contribution**

10/21/2008

**Contributor's name, mailing address and ZIP code**

Goldstein Group Inc.  
2117 State Street Suite 250  
Bettendorf, IA 52722

**Name of contributor's employer**

N/A

**Contributor's occupation**

N/A

**Aggregate contributions year-to-date**

\$ 12500

**Amount of contribution**

\$ 12500

**Date of contribution**

10/17/2008

**Contributor's name, mailing address and ZIP code**

Flint Hills Resources LP  
PO Box 2917  
Wichita, KS 67201 - 2917

**Name of contributor's employer**

N/A

**Contributor's occupation**

N/A

**Aggregate contributions year-to-date**

\$ 10000

**Amount of contribution**

\$ 10000

**Date of contribution**

11/03/2008

**Contributor's name, mailing address and ZIP code**

Koch Minerals Services, LLC  
PO Box 2219  
Wichita, KS 67201

**Name of contributor's employer**

N/A

**Contributor's occupation**

N/A

**Aggregate contributions year-to-date**

\$ 10000

**Amount of contribution**

\$ 10000

**Date of contribution**

10/21/2008

**Schedule B    Itemized Expenditures**

Schedule B

**Recipient's name, mailing address and ZIP code**

360 JMG, LLC  
718 Seventh Street NW Suite 310  
Washington, DC 20001

**Name of recipient's employer**

N/A  
**Recipients's occupation**  
N/A

**Amount of Expenditure**

\$ 20007  
**Date of expenditure**  
10/24/2008

**Purpose of expenditure**

Mail Production Services

**Recipient's name, mailing address and ZIP code**

MP Advantage  
333 E. Grand Avenue #119  
Des Moines, IA 50309

**Name of recipient's employer**

N/A  
**Recipients's occupation**  
N/A

**Amount of Expenditure**

\$ 5000  
**Date of expenditure**  
11/01/2008

**Purpose of expenditure**

Consulting Services

**Recipient's name, mailing address and ZIP code**

MP Advantage  
333 E. Grand Avenue #119  
Des Moines, IA 50309

**Name of recipient's employer**

N/A  
**Recipients's occupation**  
N/A

**Amount of Expenditure**

\$ 3000  
**Date of expenditure**  
11/20/2008

**Purpose of expenditure**

Consulting Services